



HW Docket No.: H0005274 - 4580

**DECLARATION FOR PATENT APPLICATION
SOLE OR JOINT**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention titled:

MULTIPHASE FIBER MATERIALS AND COMPOSITIONS, METHODS OF MANUFACTURE AND USES THEREOF

the specification of which is attached hereto unless the following box is checked.

X was filed on November 18, 2003 as United States Application Number or PCT International ApplicationNumber 10/717048 and was amended on _____ (If Applicable).

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE-IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS.

I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION THAT IS MATERIAL TO THE PATENTABILITY OF THIS APPLICATION IN ACCORDANCE WITH TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States applications listed below and, INsofar AS THE SUBJECT MATTER OF EACH OF THE CLAIMS OF THIS APPLICATION IS NOT DISCLOSED IN THE PRIOR UNITED STATES APPLICATION IN THE MANNER PROVIDED BY THE FIRST PARAGRAPH OF TITLE 35, UNITED STATES CODE, §112, I ACKNOWLEDGE THE DUTY TO DISCLOSE MATERIAL INFORMATION AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a) WHICH OCCURRED BETWEEN THE FILING DATE OF THE PRIOR APPLICATION AND THE NATIONAL OR PCT INTERNATIONAL FILING DATE OF THIS APPLICATION:

(Application Serial Number)	(Filing Date)	(STATUS: Patented, Pending, Abandoned)
(Application Serial Number)	(Filing Date)	(STATUS: Patented, Pending, Abandoned)

SEND CORRESPONDENCE TO:

Sandra P. Thompson
Bingham McCutchen, LLP
Three Embarcadero Center
San Francisco, CA 94111-4067

DIRECT TELEPHONE CALLS TO:

Sandra P. Thompson (714) 433-2622

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF SOLE OR FIRST INVENTOR John B. Boyle
INVENTOR'S SIGNATURE *John B. Boyle* Date 12/13/03
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 305 Redbird Drive - Chester, VA 23836

FULL NAME OF SECOND JOINT INVENTOR James A. Kweeder
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 2835 Pine Meadow Circle - Chester, VA 23831

FULL NAME OF THIRD JOINT INVENTOR Dale A. Hangey
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Midlothian, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 629 Glenmeadow Road - Midlothian, VA 23113

FULL NAME OF FOURTH JOINT INVENTOR Samir Abdalla
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chula Vista, CA
CITIZENSHIP _____
POST OFFICE ADDRESS 1301 Medical Center Drive, Apt. 522, Chula Vista, CA 91911

FULL NAME OF FIFTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SIXTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SEVENTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

DECLARATION FOR PATENT APPLICATION—SOLE OR JOINT (Cont'd.)

HW Docket No.: H0005274 - 4580 Page 2

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF SOLE OR FIRST INVENTOR John B. Boyle
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 305 Redbird Drive - Chester, VA 23836

FULL NAME OF SECOND JOINT INVENTOR James A. Kweeder
INVENTOR'S SIGNATURE *James Kweeder* Date 8 December 2003
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 2835 Pine Meadow Circle - Chester, VA 23831

FULL NAME OF THIRD JOINT INVENTOR Dale A. Hangey
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Midlothian, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 629 Glenmeadow Road - Midlothian, VA 23113

FULL NAME OF FOURTH JOINT INVENTOR Samir Abdalla
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chula Vista, CA
CITIZENSHIP _____
POST OFFICE ADDRESS 1301 Medical Center Drive, Apt. 522, Chula Vista, CA 91911

FULL NAME OF FIFTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SIXTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SEVENTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

DECLARATION FOR PATENT APPLICATION—SOLE OR JOINT (Cont'd.)

HW Docket No.: H0005274 - 4580 Page 2

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF SOLE OR FIRST INVENTOR John B. Boyle
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 305 Redbird Drive - Chester, VA 23836

FULL NAME OF SECOND JOINT INVENTOR James A. Kweeder
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 2835 Pine Meadow Circle - Chester, VA 23831

FULL NAME OF THIRD JOINT INVENTOR Dale A. Hangey
INVENTOR'S SIGNATURE Dale A. Hangey Date 12/10/03
RESIDENCE Midlothian, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 629 Glenmeadow Road - Midlothian, VA 23113

FULL NAME OF FOURTH JOINT INVENTOR Samir Abdalla
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chula Vista, CA
CITIZENSHIP _____
POST OFFICE ADDRESS 1301 Medical Center Drive, Apt. 522, Chula Vista, CA 91911

FULL NAME OF FIFTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SIXTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SEVENTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF SOLE OR FIRST INVENTOR John B. Boyle
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 305 Redbird Drive - Chester, VA 23836

FULL NAME OF SECOND JOINT INVENTOR James A. Kweeder
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Chester, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 2835 Pine Meadow Circle - Chester, VA 23831

FULL NAME OF THIRD JOINT INVENTOR Dale A. Hangey
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE Midlothian, VA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 629 Glenmeadow Road - Midlothian, VA 23113

FULL NAME OF FOURTH JOINT INVENTOR Samir Abdalla
INVENTOR'S SIGNATURE Samir Abdalla Date December 11, 2003
RESIDENCE Chula Vista, CA
CITIZENSHIP U.S.
POST OFFICE ADDRESS 1301 Medical Center Drive, Apt. 522, Chula Vista, CA 91911

FULL NAME OF FIFTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SIXTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

FULL NAME OF SEVENTH JOINT INVENTOR _____
INVENTOR'S SIGNATURE _____ Date _____
RESIDENCE _____
CITIZENSHIP _____
POST OFFICE ADDRESS _____

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected herewith (List name and registration number).

(LIST SENIOR PATENT COUNSEL AND ATTORNEY HANDLING CASE WITH PATENT OFFICE REGISTRATION NUMBERS.)

Shannon Votava

Name

48,272

Registration Number

Steven J. Kirschner

Name

35,573

Registration Number

Shannon Morris

Name

42,909

Registration Number

Sandra P. Thompson

Name

46,264

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number

Name

Registration Number